

**Christina's Tax Service, Inc.**

**New Address: 11757 Katy Freeway, Suite 1050, Houston, TX 77079**

**Main: (713) 781-8291 Alt: (281) 617-7239 Fax: (713) 781-7758**

**Incorporation Checklist**

3 – 4 Corporate Names that you would like to use in the order of your preference

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

**Line of Business:** \_\_\_\_\_

**County:** \_\_\_\_\_

**Names of Officers and Titles:**

1. Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Tel: Home \_\_\_\_\_ Office: \_\_\_\_\_ Cell: \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Social Security Number \_\_\_\_\_  
Title \_\_\_\_\_ % of Ownership \_\_\_\_\_

2. Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Tel: Home \_\_\_\_\_ Office: \_\_\_\_\_ Cell: \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Social Security Number \_\_\_\_\_  
Title \_\_\_\_\_ % of Ownership \_\_\_\_\_

3. Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Tel: Home \_\_\_\_\_ Office: \_\_\_\_\_ Cell: \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Social Security Number \_\_\_\_\_  
Title \_\_\_\_\_ % of Ownership \_\_\_\_\_

**Email: christinastax1@yahoo.com**